





eduséxoge

Sexual health and wellbeing of older adults.

Dr Martin Power & Dr Saintuya Dashdondog.







Aim – to raise awareness of the taboo that surrounds older people and sex, and to develop education and training materials for both older people and health and social care professionals.

Phase one – users report. Survey of over 200 (n=224) older people, plus focus groups/interviews - 6 focus groups (n=25), 8 interviews.

Phase two – development of materials and online platform to host materials in the languages of the partners – English, Germany, Italian, French, Slovenian and Spanish.

https://edusexage-mooc.eu/





















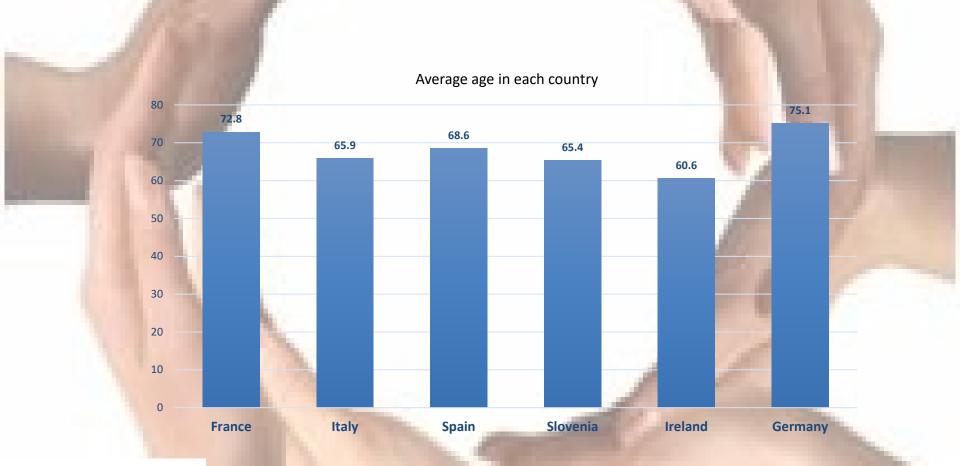
The partnership agreed that 'sexuality' would be the term used by the partnership and included within its meanings for the purposes of the project were 'sex, sex life, sexual activity and sexuality'.

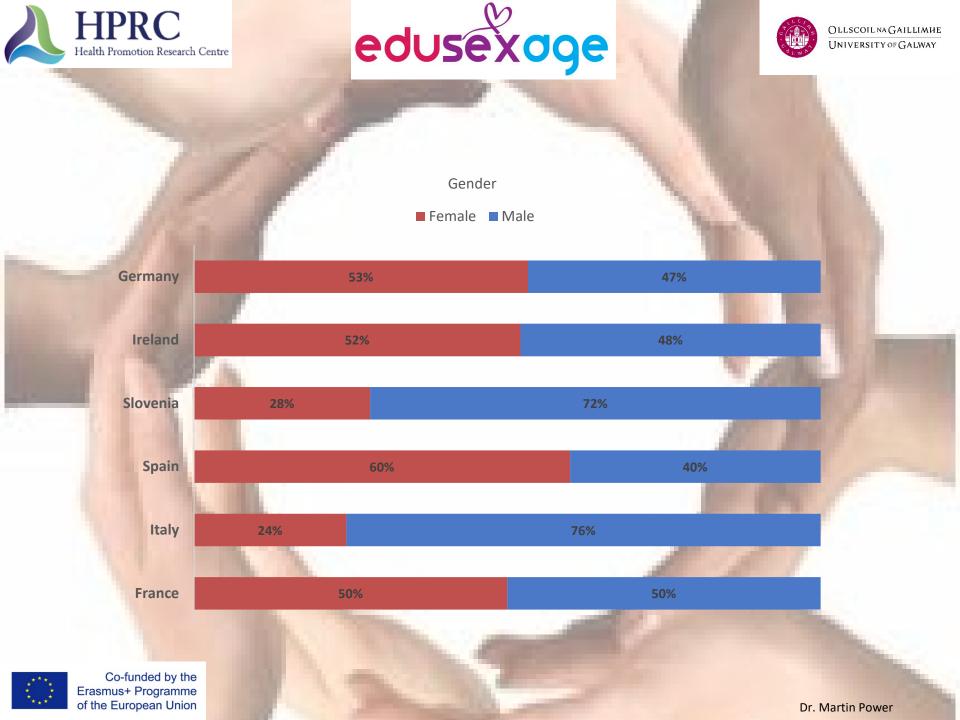


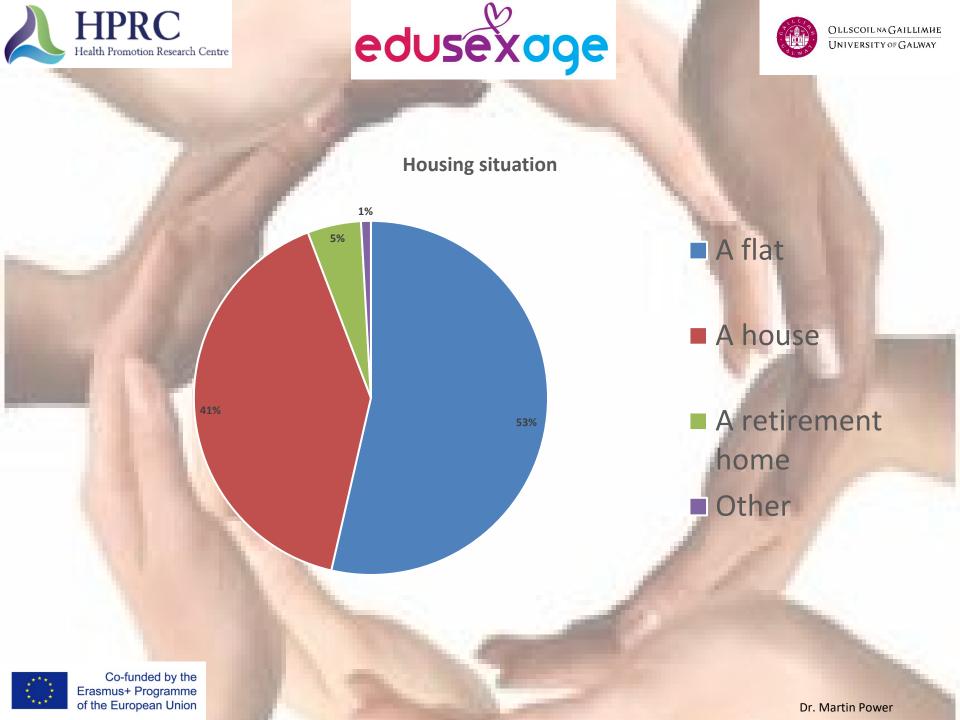




Average age was 68, with the youngest respondent 52 and the oldest 89 years of age.



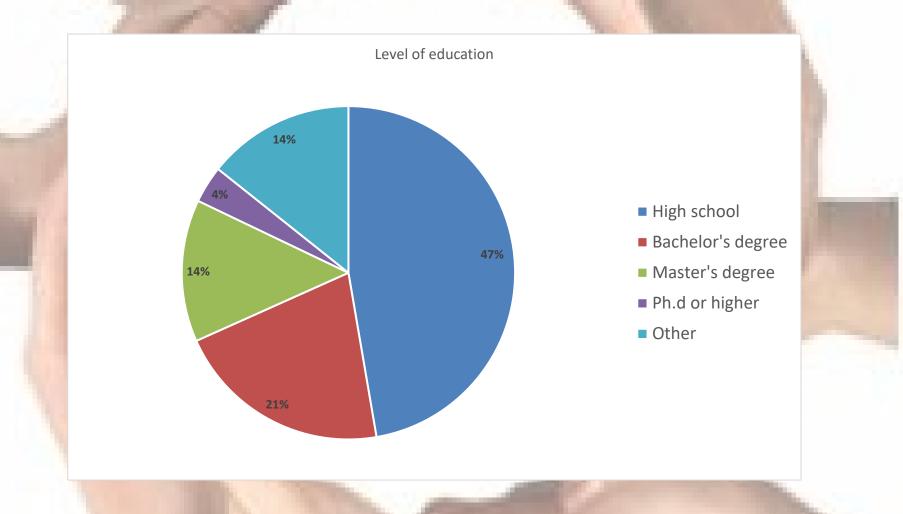


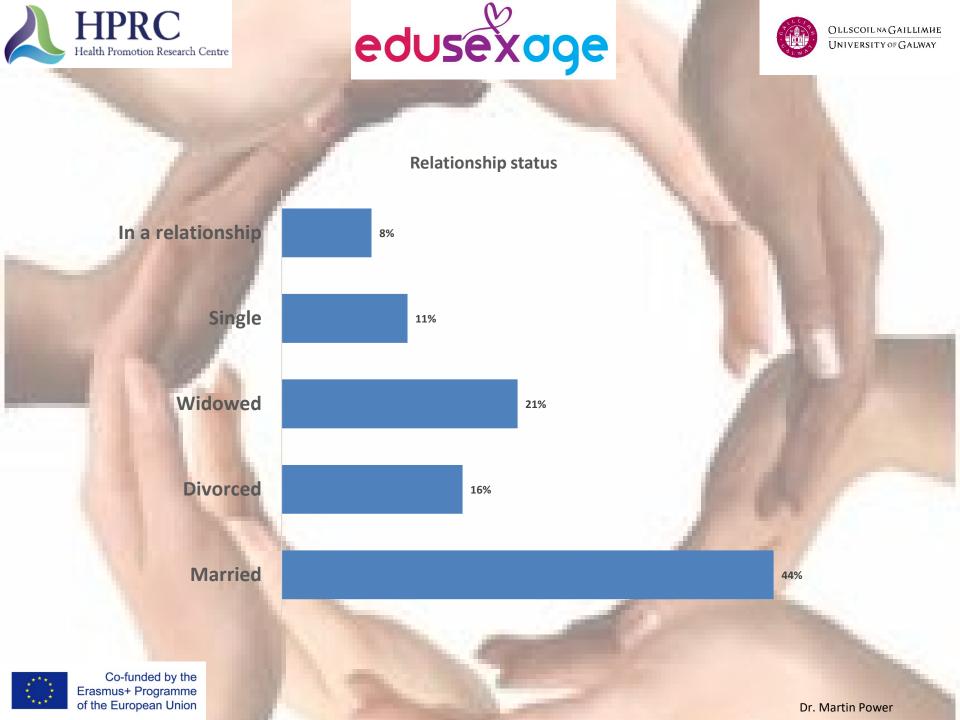


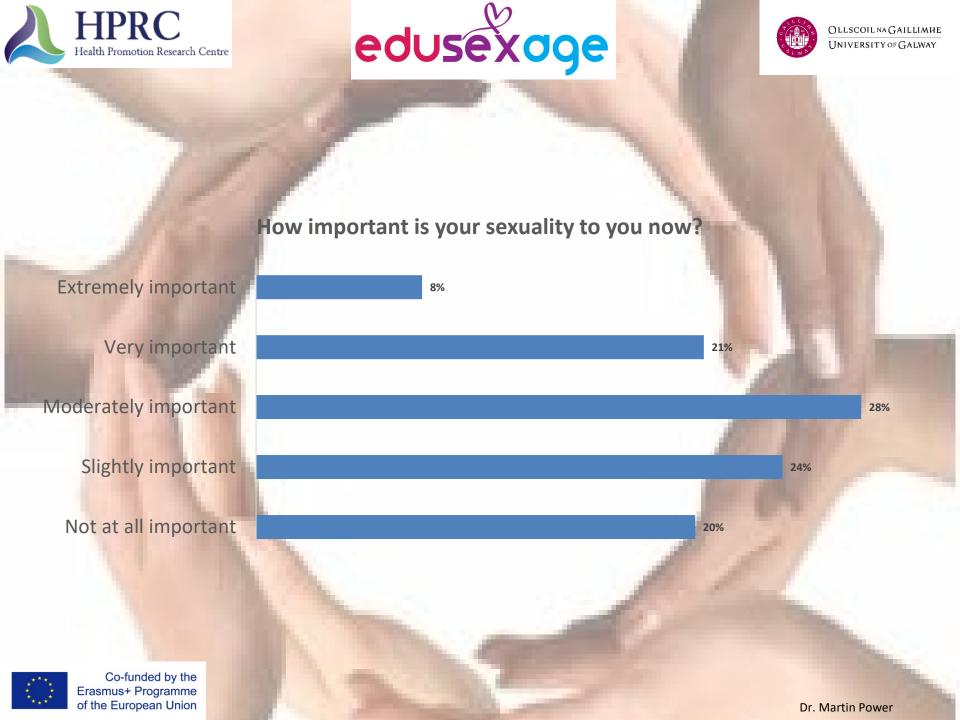


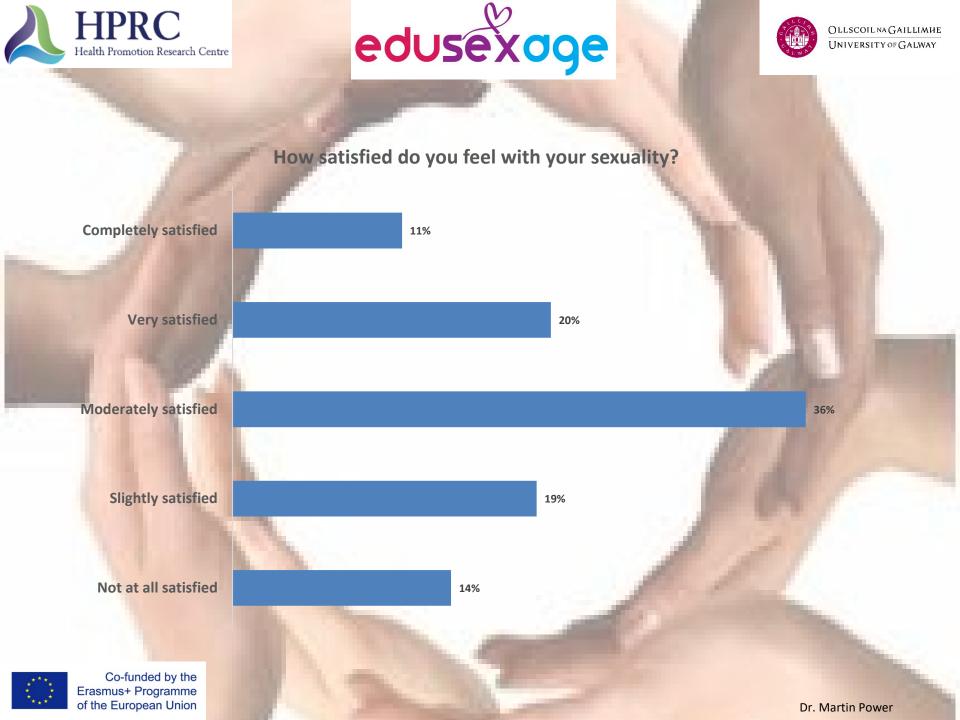


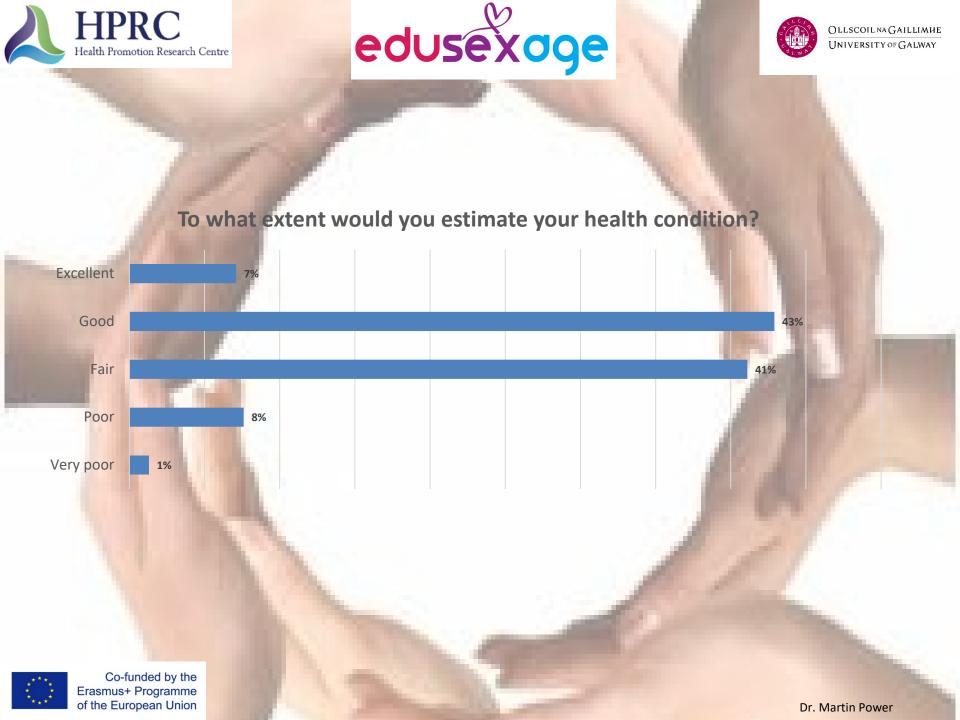








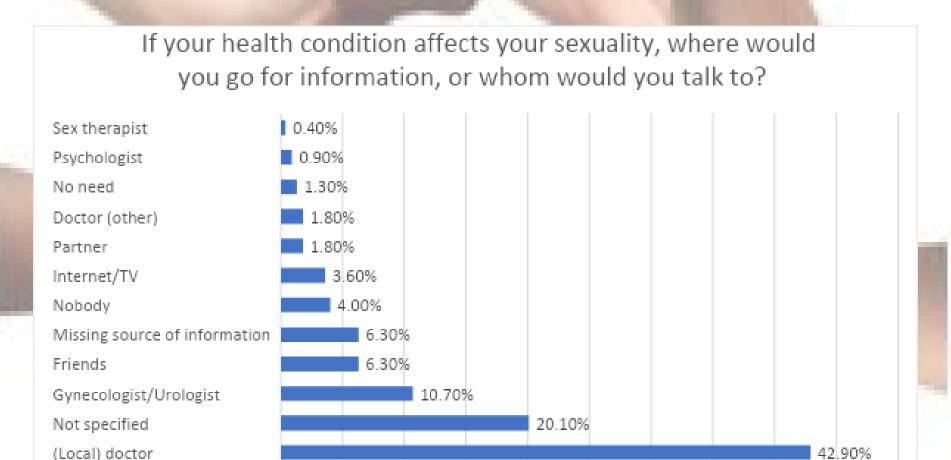












Respondents could choose more than one answer.

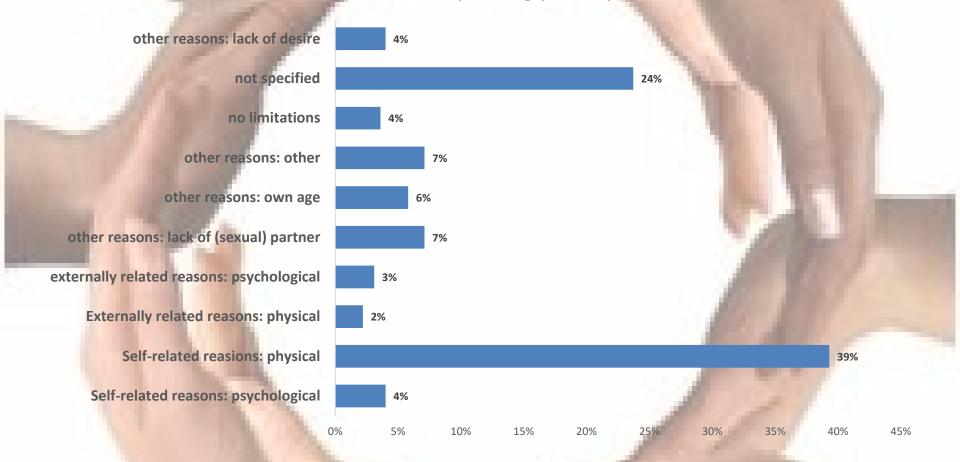








What are the reasons that may strongly limit your sexual activity?

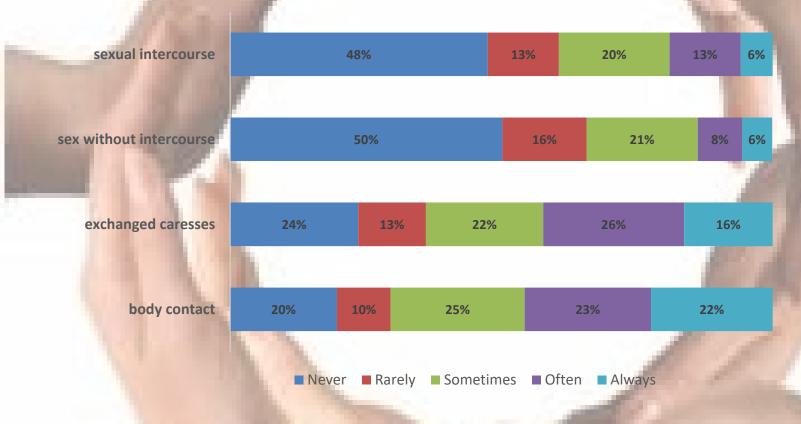








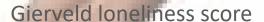
During the last 12 months, how often have you had?

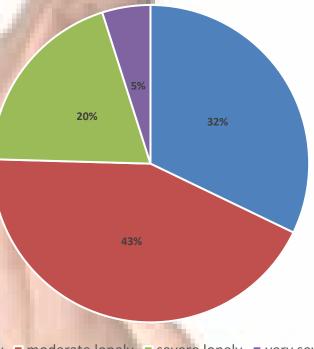




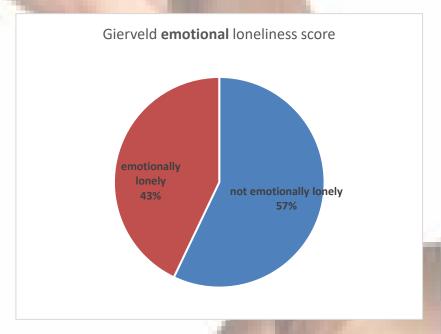




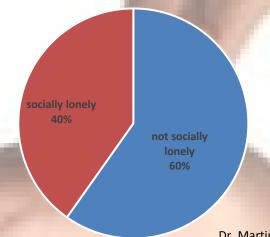


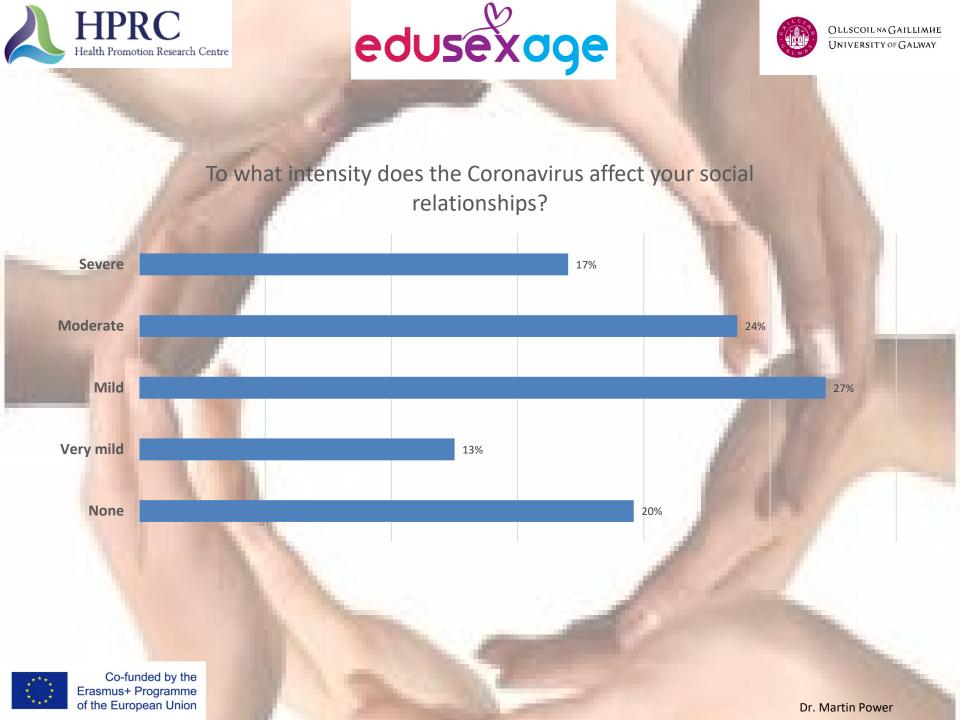






Gierveld social loneliness score











Focus groups (n=25) and individual interviews (n=8).

Local thematic analysis (language/recruitment issues), with researchers meeting and combining results.

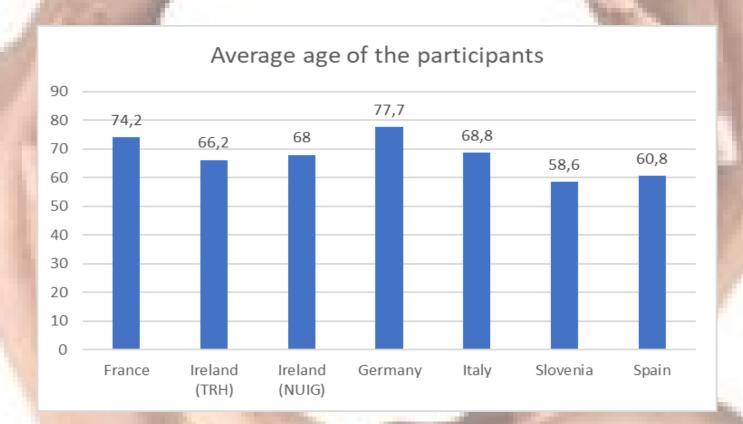
Reflects a similar underrepresentation of older people in contemporary studies – International Sex Survey.

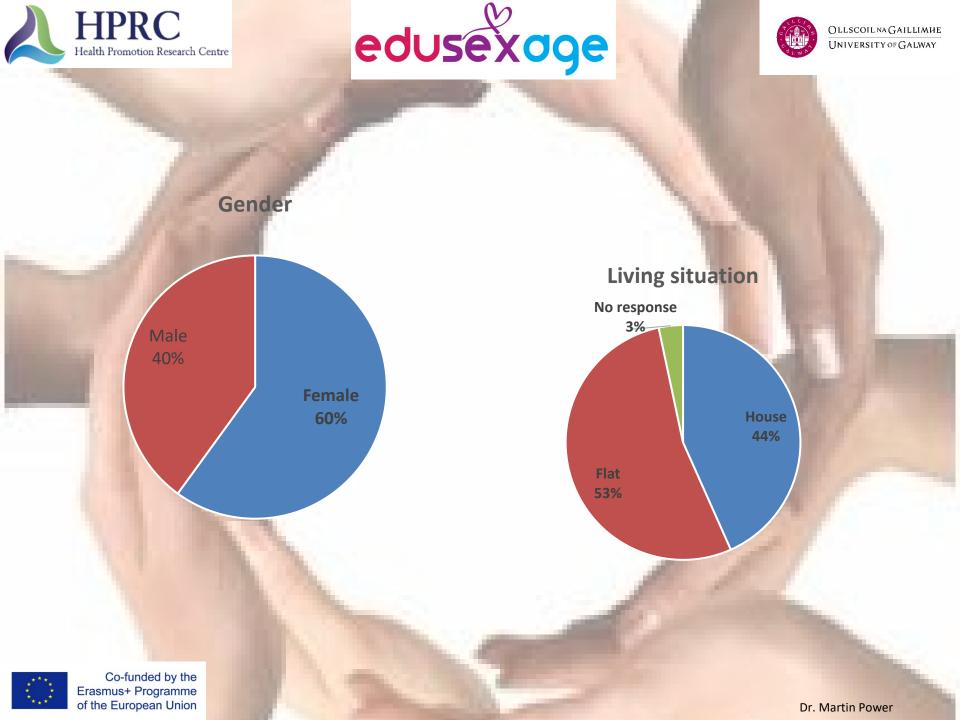


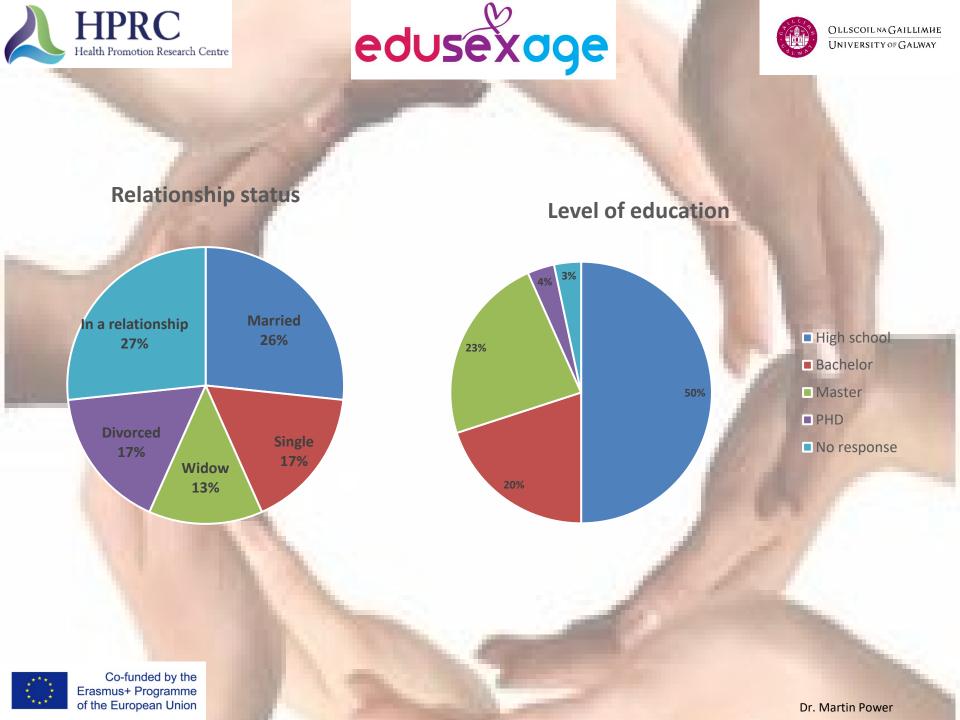




Youngest 54, oldest 81.













Unanimous agreement that ageing impacts sexuality, both physically and mentally. Feeling less attractive and confident.

General decrease in libido with increasing age.

Greater appreciation for physical intimacy (kissing, holding hands) and more emphasis on communication.

Sexual activity was felt to me freer (less distractions, ie. children, work or risk of pregnancy).







Relationship status differences –

In a relationship – more focus on intimacy than when younger.

Widowed or single – often felt few opportunities for forming new relationship (ageing impacts around attractiveness and confidence and limited opportunities).

Older men perceived as having more sexual desire than older women. However, the responses suggest this more likely reflected a social norm and that the reality was very different.







Societal representations -

Societies much more open about sex, but older people felt this was often not extended to include older people.

Often internalised by older people, but with women more open to discussing topic with close friends than men.

Media often felt to portray ageing predominately in negative physical terms (wrinkles, grey hair), contributing to older people as largely invisible.

Infrastructure of care – largely single rooms in nursing homes and policies generally prohibit sexual expression (family influences).









Challenges for older people.

Declining physical health seen as biggest challenge, also impacting confidence and leading to avoidance.

Lack of a partner – widowed, divorced or partner's ill-health.

Societal perceptions of older people as asexual and children's perceptions, especially if introducing a new partner.

Limited social opportunities for older people and cost of socialising.

More opportunities for men due to ratio of women to men.









Older peoples' perceptions in relation to health and social care professionals (HSCPs) around sexuality.

Impact of societal view of older people as asexual – impacted both HSCPs and older people.

HSCPs often dismissive and occasional expressions of disgust.

"doctors treat sexuality as if it were a disease when it's actually very natural"

Lack of services for older people.







At the same time -

Older people reluctant to raise the topic with HSCPs.

Both older people and HSCPs point to fear of causing discomfort or embarrassment, especially where there are -

Age, gender and/or cultural differences.

Compounded by – time demands and a lack of privacy.







Societal attitudes.

Media.

Limited services.

HSCPs.

Older people

Health ageing campaigns (but not sexuality).

Children.

Infrastructure – single rooms.

Older people (internalisation).







Review of the National Sexual Health Strategy (2023).

Recommendation 7.

"Actions targeted to benefit older people.

The current NSHS does not include a strong focus on the sexual health and wellbeing of people over 40 years, and this may be a consideration for inclusion in the next strategy. As well as the significant wellbeing challenges that are associated with menopause and erectile dysfunction, there is recent evidence in Ireland of an increase in STIs in older age groups."

